

NHSE Low Value Medicines Co-proxamol

Medicines Management Team Statement

NHS England, as part of the Low Value Medicines consultation, has recommended to the Department of Health that **CO-PROXAMOL** tablets be formally considered for the 'blacklist' (Drug Tariff Part XVIII A - Drugs, Medicines and Other Substances not to be ordered under a GMS Contract).

This treatment should no longer be prescribed in primary care on the NHS.

Review all patients with NHS prescriptions for co-proxamol tablets and STOP NHS supply; do not initiate any new patients.

Introduction

Co-proxamol (paracetamol 325mg + dextropropoxyphene 32.5mg) is a pain killer which had its marketing authorisation withdrawn in 2007 due to safety concerns (toxicity in overdose) and lack of evidence of additional benefit over full dose paracetamol. It is an unlicensed 'special' product, costing £300 for 100 tablets. Dextropropoxyphene has been withdrawn worldwide, limiting stocks and further increasing the price to source the ingredient.

It is not listed on any of the three Wiltshire area formularies. Compared with other CCGs, Wiltshire is approximately on the 65th percentile for use per 1000 patients.

It is not a cost-effective product for the NHS. No patient group has been identified in which the risk:benefit ratio of using co-proxamol is positive.

Co-proxamol is an unlicensed medicine so all prescribing responsibility rests solely with the prescriber. If the GP does decide to take on prescribing he/she should consider the GMC guidance around prescribing unlicensed medicines, <http://www.gmc-uk.org/guidance/28349.asp>

Expected Actions

- **GP practices to identify patients currently obtaining NHS prescriptions for co-proxamol.**
- **Advise patients that co-proxamol is considered no longer available and stop prescribing on the NHS.**
- **Use the PrescQIPP support tools including the Co-proxamol patient information leaflet on the attached pages; and the PrescQIPP Bulletin linked below.**
- **Offer support to patients by withdrawing supply of co-proxamol and substituting with paracetamol at the full recommended strength.**
- **If needed, consider use of codeine or other weak opioids.**
- **Avoid use of combination products that do not allow titration of separate ingredients.**

References

1. PrescQIPP Bulletin 194 Jan 2018 Co-proxamol available from: <https://www.prescqipp.info/component/downloads/send/90-co-proxamol/3891-bulletin-194-co-proxamol>
2. PrescQIPP Changes to co-proxamol prescribing. Available from: <https://www.prescqipp.info/component/downloads/send/418-items-which-should-not-routinely-be-prescribed-in-primary-care-nhs-patient-leaflets/3774-patient-information-changes-to-co-proxamol-prescribing> (and the WCCG version is available on MMT website)
3. NHS England Consultation Report on Findings 30 November 2017 available from <https://www.england.nhs.uk/publication/items-which-should-not-be-routinely-prescribed-in-primary-care-consultation-report-of-findings/>
4. Wilts CCG Low Value Medicines Part 1 Blacklist December 2018. Available from <https://prescribing.wiltshireccg.nhs.uk/?wpdmdl=1739>

Information about changes to medicines or treatments on the NHS: **Changes to co-proxamol prescribing**

The NHS will be asking doctors to stop or greatly reduce the prescribing of some medicines from December 2017. This is because the medicines are:

Not as safe as other medicines OR

Not as good (effective) as other medicines OR

More expensive than other medicines that do the same thing.

One of these medicines is co-proxamol.

This document will explain why the changes are happening and where you can get more information and support.

Why will co-proxamol not be prescribed anymore?

In 2007 the Medicines and Healthcare products Regulatory Agency (MHRA) stopped the licence* for co-proxamol because of safety concerns. The lethal dose of co-proxamol is quite low and it is even more lethal if taken with alcohol or other drugs. Death from co-proxamol overdose can occur quickly, even before you can be treated in hospital. The risk of dying after a co-proxamol overdose is 28 times higher than from a paracetamol overdose.

Also, co-proxamol is not considered to work well enough and other drugs do a better job of reducing pain. Since the licence was stopped the price of co-proxamol has increased, so it is not good value for money. The price is too high for a drug that doesn't work as well as others.

*Having a licence means that a medicine has passed tests to ensure that it is effective, safe and manufactured to appropriate quality standards. As co-proxamol does not have a UK licence, patients and doctors can no longer be sure that this is the case.

Did the MHRA say that a small group of patients would still need co-proxamol because other medicines would not be suitable?

The MHRA did say this when they first published their advice in 2005 but they pointed out that co-proxamol would not have a licence, and so its effectiveness, quality and safety could no longer be certain.

Pain treatments have changed in the 10 years since the co-proxamol licence was stopped. Pain specialists now say that patients on long-term pain relief should be reviewed regularly and the amount of opioid medicine they take should be reduced if possible (co-proxamol is an opioid).

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Why haven't other harmful painkillers been stopped?

Co-proxamol was withdrawn because of both safety concerns and lack of effectiveness. There are other painkillers that may be more harmful than co-proxamol but they work much better, so doctors may consider that the risk of using them is justified. For co-proxamol, which doesn't work very well compared to other medicines, the risk of overdose is not worth taking.

What options are available instead of co-proxamol?

Your doctor will talk to you about different painkiller options so that you can come to a joint decision about what option is best to relieve your pain.

Painkillers usually only reduce pain by 30% to 50%, so you can talk to your doctor about other things you can do to help manage your pain such as massage, ice or heat therapy and gentle exercise.

Where can I find more information and support?

- You can speak to your local pharmacist, GP or the person who prescribed the medication to you
- National and local charities can offer advice and support, for example:
 - Pain Concern: 0300 1230789 <http://painconcern.org.uk/>
 - Pain UK: <https://painuk.org>
- The Patients Association can also offer support and advice: www.patients-association.org.uk/ or call 020 8423 8999
- Healthwatch: www.healthwatch.co.uk

Find out more about the medicines that are being stopped or reduced:

<https://www.england.nhs.uk/medicines/items-which-should-not-be-routinely-prescribed/>

Find out more about licensed and unlicensed medicines: <https://www.gov.uk/drug-safety-update/off-label-or-unlicensed-use-of-medicines-prescribers-responsibilities#a-licensed-medicine-meets-acceptable-standards-of-efficacy-safety-and-quality>

If you have any questions about co-proxamol prescribing please email them to: england.medicines@nhs.net